



Lindsey Wilson College
Student Financial Services
210 Lindsey Wilson Street
Columbia, KY 42728

2011-12 Student Special Circumstances

INSTRUCTIONS: According to federal laws and regulations, a family's 2010 income is used to assess financial need for the 2011-2012 school year. If a family's 2010 income is lower due to special circumstances, a financial aid administrator may be able to use the 2011 income to assess financial need. Please provide information regarding your reduction in income by completing this form.

Student's Name _____
Social Security Number or LWC ID # _____
Address _____
City, State, Zip _____
Parent's Name(s) _____

1. Indicate the reason(s) for your reduction in income on page 2-3, complete required sections A, B, and C. Attach any required documentation.
2. Write a brief summary of your special circumstance on page 4 and complete the signature requirements.

Your special circumstance request will not be considered unless you provide adequate and appropriate documentation. **Also, your special circumstance will not be considered unless you provide tax returns for both the student and the parent (if a dependent student).**

FOR OFFICE USE ONLY	
Prior year special circumstances: Yes _____ No _____	
Comments: _____ _____	
<input type="checkbox"/> Not eligible for special circumstances	<input type="checkbox"/> Special Circumstances Denied
<input type="checkbox"/> Special circumstances approved:	Old EFC _____ New EFC _____
_____	_____
Administrator's Signature	Date

Mark all that apply and attach the required documentation.

_____ Loss of income from work. Choose one of the reasons listed below. Complete sections A and/or B, and C on the following pages. Period of unemployment from _____ to _____.

- _____ Layoff. Provide a letter from employer stating effective date and anticipated return.
- _____ Plant Closing. Provide a letter from employer stating effective date.
- _____ Termination. Provide a letter from employer stating effective date. If this is not available provide documentation from the local unemployment office.
- _____ Disability. Date of disability (mm/dd/yy) _____. Attach documentation of the disability.
- _____ Quit or reduced employment to attend school. Provide a letter from employer stating effective date.
- _____ Other. Please specify and provide appropriate documentation.

_____ Loss of taxable income. Choose one of the reasons listed below. Complete sections A and/or B, and C on the following pages.

- _____ Alimony. Provide court document(s) stating termination date of benefit.
- _____ Unemployment. Provide a letter from the unemployment office stating termination date of benefit.
- _____ Other. Please specify and provide appropriate documentation.

_____ Loss of untaxed income. Choose one of the reasons listed below. Complete sections A and/or B, and C on the following pages.

- _____ Social Security. Provide Social Security Administration notification of termination of benefit.
- _____ Child Support. Provide a letter or court document stating termination date of benefits.
- _____ Worker's Compensation. Provide a letter from Bureau of Worker's Compensation stating termination date of benefit.
- _____ Other. Please specify and provide appropriate documentation.

_____ Divorce. Since applying for financial aid, you have become divorced. Date of divorce _____. Give only your information when completing sections B and C on the following pages. **Attach a copy of the divorce decree and your 2010 W-2 form(s).**

____ Separation. Since applying for financial aid, you have become separated. Date of separation _____.
 Current address of spouse _____.
 Give only your information when completing sections B & C on the following pages. Attach a copy of your 2010 W-2 form(s).

____ One-time income. (Please identify _____)
 You must attach a separate sheet that identifies source of income and how funds were spent or invested. Complete sections A and/or B, and C on the following pages.

____ Other unusual expenses paid. Provide documentation.

____ Medical or dental expenses. You have paid medical or dental expenses for the 2010 calendar year that are not covered by insurance and these expenses exceed 5% of your total income. Provide a copy of Schedule A of 2010 Federal tax returns.

____ Elementary and secondary education paid. You have paid for elementary, junior high, and/or high school tuition for this calendar year for dependents in your family. Provide documentation.

Section A.

PARENT INCOME: Report all income your parents have actually received from January 1, 2011 through today. Then estimate all income your parents expect to receive through December 31, 2011. **ATTACH DOCUMENTATION OF ALL INCOME.** Documentation could include recent pay stubs with year-to-date earnings, W-2 forms, a letter from an employer stating total earnings, and estimate of future income, etc. After December 31, 2011, you will be required to submit a copy of your completed 2011 federal tax return.

INCOME FOR JANUARY 1, 2011 TO DECEMBER 2011	ACTUAL 1-1-11 to Today +	ESTIMATED Today to 12-31-11 =	TOTAL ACTUAL + ESTIMATED
Expected 2011 income earned from work by father (wages, salaries, tips, net business/farm income)	\$	\$	\$
Expected 2011 income earned from work by mother (wages, salaries, tips, net business/farm income)	\$	\$	\$
Other taxable income (dividends, interest, pensions, annuities, alimony, unemployment compensation, capital gains, etc.) SOURCE:	\$	\$	\$
Other untaxed income (welfare, benefits, workers comp., payments to IRA/KEOGH, Social Security, child support) SOURCE:	\$	\$	\$
TOTAL INCOME FOR 2011	\$	\$	\$

CERTIFICATION: I certify that the information provided above is true and complete to the best of my knowledge.

Parent's Signature _____ Date _____

